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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004									Application or Docket Number		
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
	FOR	· NU	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (5)	7	DATE (6)	•
	SIC FEE CFR 1.16(a), (b), c	r (c))	ŅVA		, N/A	7	N/A	150.00	1	RATE (\$)	300.00
SEARCH FEE (37 CFR 1 16(4), (1), or (m))			N/A	7	N/A.	7	· N/A	\$250	1	N/A	
E)	WANTON FE		N/A .		1 N/A		N/A	\$100	1	N/A	\$500 \$200
TC	CFR 1.16(c), (p), c TAL CLAIMS CFR 1.18(i))	(40)		20 - 1		1	X\$ 25 .	1	-	X\$50	\$200
IN	DEPENDENT CL CFR 1.16(h))	AIMS	minus 20 = *			 	X100 _	 	OR	X200	•
APPLICATION SIZE FEE (37 CFR 1.16(e)) If the specification and dresheets of paper, the applik is \$250 (\$125 for small en additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and					n size fee due for each thereof. See					7200	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							+180=			+360=	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	·]	TOTAL	
	APP	LICATION AS	AMEN	DED - PART		-	•				
(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A	12/00	AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT, EXTRA	$\ \cdot\ $	RATE (3)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	(DT CFR 1/10(1))			27	7		X\$ 25 .	1	OR	X\$50 _	250.06
	Independent (37 CFR 1,16(h))	7	Minus.	6	-		X100 _		OR	X200 _	20006
A	•										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,160)					J L	+180=		OR	+360=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	55000
		(Column 1)		(Column 2)	(Column 3)		·				
AMENDMENT B	:	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (S)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1,16(1))		Minus _:	••	*		X\$ 25		OR	X\$50 · =	·
	Independent (27 CFR 1.18(t))		Minus	•••	=		X100 _		OR	X200	
ş	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16@)						+180=		OR	+360=	
							OTAL.			TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3"											

The "Highest Number Previously Peld For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is restinated to take 12 minutes to completed including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Depertment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.